

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY PUBLIC

February 20, 2025

[REDACTED]
FAMILY CARES LLC
[REDACTED]

RE: FAMILY CARES PERSONAL CARE
HOME
101 SOUTH BROAD STREET
NEW FREEDOM, PA, 17349
LICENSE/COCC#: 33794

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/21/2024 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,

[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: FAMILY CARES PERSONAL CARE HOME License #: 33794 License Expiration: 12/19/2024
 Address: 101 SOUTH BROAD STREET, NEW FREEDOM, PA 17349
 County: YORK Region: CENTRAL

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: FAMILY CARES LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 11/01/2004 Issued By: Department of Labor & Industry

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 13 Waking Staff: 10

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Interim Exit Conference Date: 11/21/2024

Inspection Dates and Department Representative

11/21/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 17 Residents Served: 12

Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:

Hospice
 Current Residents: 0

Number of Residents Who:
 Receive Supplemental Security Income: 2 Are 60 Years of Age or Older: 10
 Diagnosed with Mental Illness: 1 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 1 Have Physical Disability: 1

Inspections / Reviews

11/21/2024 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/14/2024

Inspections / Reviews (*continued*)

01/10/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/06/2024

Reviewer: [REDACTED]

Follow Up Type: *Bypass Document
Submission*

02/20/2025 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/10/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

60a - Staff/Support Plan

1. Requirements

2600.

60.a. Staffing shall be provided to meet the needs of the residents as specified in the resident's assessment and support plan.

Description of Violation

On Tuesday, [redacted] from 6:00am to 11:00am, 7:00pm to 10:00pm and 10:00pm to 6:00am, there were no staff working in the home with current medication or diabetic training, and therefore no staff available to dispense medications should residents require them.

Plan of Correction

Accept [redacted] - 12/10/2024)

the administrator is responsible for making sure the schedule is accurate and correct.

I, the administrator, mistakenly erased my name from the schedule while revising it. I revised the schedule to give my staff off for his birthday on November 23rd. I put him on the schedule to work on November 2nd in exchange for taking him off on November 23rd. When I made the revision, I mistakenly forgot to put my name back on the schedule on November 2nd with the working hours of 6am-6am

I worked during the times mentioned above. I work every day at the home to ensure that every hour of the day, there is a trained staff present at the home to complete the necessary tasks such as administering medications, direct care and administrative tasks. I am able to have breaks when other staff are working to avoid burnout, but I make myself available every day to assist with the necessary duties.

Moving forward, the administrator will make sure all information on the schedule is correct prior to posting, effective immediately and ongoing.

the administrator will ensure that all information on the schedule is accurate and correct by double checking the inputted information prior to posting the schedule. I will review each day making sure the times are correct, and the appropriate trained staff is scheduled. I will make sure staff is available on the days in which I add them on the schedule. The administrator will ensure staff is scheduled 24 hours a day 7 days a week

when there is a need for revision to the schedule, the administrator will double check again before reposting to ensure all information is correct and all hours are covered

this is effective immediately as of 11/21/2024 and will continue ongoing

Licensee's Proposed Overall Completion Date: 12/06/2024

Implemented [redacted] - 02/20/2025)

132d - Evacuation

2. Requirements

2600.

132.d. Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert. For purposes of this subsection, the fire safety expert may not be a staff person of the home.

Description of Violation

The home does not have a maximum safe evacuation time specified in writing within the past year by a fire safety expert. The home exceeded an evacuation time of 2 minutes 30 seconds during the following drills:

- [redacted], Evacuation Time: 3 Minutes
- [redacted], Evacuation Time: 3 Minutes, 2 Seconds
- [redacted], Evacuation Time: 3 Minutes, 12 Seconds

132d - Evacuation (continued)

- [REDACTED], Evacuation Time: 4 Minutes, 32 Seconds

Plan of Correction

Accept [REDACTED] 12/10/2024)

the administrator has been informed of the appropriate evacuation time therefore the administrator has conducted a fire drill on November 26th at 9:16am and was able to evacuate all residents within 2 minutes and 6 seconds. The administrator will continue to conduct fire drills on Tuesdays until our scheduled fire drill with fire experts from BFPE. the administrator has decided to utilize this company to ensure consistent completion of the annual fire drills in a timely manner. The administrator has decided not to partner with local fire department to perform these drills due to the lack of communication and prolonged wait times.

Moving forward, effective immediately and ongoing the administrator will ensure all fire drills are completed within the allotted safe evacuation times. If at any time during a fire drill, the safe evacuation time isn't met, the administrator or/and staff will reconduct another drill on the next day or on the same day but on another shift. All fire drills will continue to be timed and documented. Staff has been made aware of the new evacuation time. this will be implemented effective immediately as of 12/6/2024 and continue ongoing

Licensee's Proposed Overall Completion Date: 12/06/2024

Implemented [REDACTED] - 02/20/2025)

141a 1-10 Medical Evaluation Information

3. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

1. A general physical examination by a physician, physician's assistant or nurse practitioner.
2. Medical diagnosis including physical or mental disabilities of the resident, if any.
3. Medical information pertinent to diagnosis and treatment in case of an emergency.
4. Special health or dietary needs of the resident.
5. Allergies.
6. Immunization history.
7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
8. Body positioning and movement stimulation for residents, if appropriate.
9. Health status.
10. Mobility assessment, updated annually or at the Department's request.

Description of Violation

Resident [REDACTED] medical evaluation dated [REDACTED] did not include the resident's height, weight and pulse.

Plan of Correction

Accept [REDACTED] 12/10/2024)

See attached.

the administrative has obtained the information missing on the DME form from the resident's nurse on November 5th. the resident's current weight is 140lbs, pulse 70 and height is 5'10. the administrator has obtained the name of the nurse spoken to as well as the time and date. I initialed beside these entries on the DME form. I also attached the new fax sheet cover that I will use when requesting completion of the DME.

the administrator is responsible for making sure all of the sections of the DME has been completed and documented on the form. The administrator will thoroughly review the form once received from a resident's PCP and immediately request any missing information. This new review of all submitted DME is effective immediately as of 12/05/2024

141a 1-10 Medical Evaluation Information (continued)

and will continue ongoing

Licensee's Proposed Overall Completion Date: 12/06/2024

Implemented [REDACTED] - 02/20/2025)

184b - Labeling OTC/CAM**4. Requirements**

2600.

184.b. If the OTC medications and CAM belong to the resident, they shall be identified with the resident's name.

Description of Violation

On [REDACTED] at 12:04pm a bottle of [REDACTED] belonging to Resident [REDACTED] was observed in the medication cart and was not labeled with the resident's name.

Plan of Correction

Accept [REDACTED] - 12/10/2024)

the administrator and staff will be responsible to ensure all medications are labeled, and in the correct section of the cart. the administrator left the bottle of [REDACTED] in the resident's section because shortly before the day of inspection, we were using the bottled medication for the resident (which [REDACTED] is prescribed) instead of getting it from [REDACTED] pharmacy which [REDACTED] could not afford. But with [REDACTED] new medical insurance, [REDACTED] can afford to receive all of [REDACTED] medications in the slip packaging from [REDACTED].

the administrator has removed the bottle from [REDACTED] section and will be sure to label every medication with the correct resident's name effectively 11/21/2024 and will continue ongoing the administrator will complete medication checks on a weekly basis on Tuesdays effective 11/26/2024 and ongoing.

staff have been reminded to look for medication without the resident's name

Licensee's Proposed Overall Completion Date: 12/06/2024

Implemented [REDACTED] - 02/20/2025)